

Index of Claims

Application No.

09/625,017

Applicant(s)

LEVINE, DAVID

Examiner

John W Hayes

✓	Rejected
—	(Through numeral) Cancelled
=	Allowed

—	(Through numeral) Cancelled
÷	Restricted

N	Non-Elected
I	Interference

A	Appeal
O	Objected

Claim	Date	
Final	Original	
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2	2	=
3	3	=
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Claim	Date	
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Claim	Date	
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